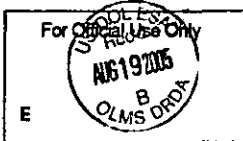


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P L 86-257 as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U S C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U 2760	2 Fiscal Year Covered From 1 / 1 / 2004 Through 12 / 31 / 2004
3 Name and address of person filing Name DON L Fontanini P O Box Bldg Room No if any Street 4408 W. 130th STREET City LEAWOOD State KANSAS ZIP Code + 4 66209	4 Name file number and address of labor organization Name LABORERS' LOCAL # 663 Labor Organization File Number 042-741 P O Box Building and Room Number if any Street 7820 Prospect City KANSAS CITY State MISSOURI ZIP Code + 4 64132
5 Position in labor organization Secretary - Treasurer	

Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)

A. Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent	
6 Name and address of Employer (including trade name if any) Name MISSOURI LEJET Trade Name if any P O Box Bldg Room No if any Street 1101 E 87th STREET City KANSAS CITY State MISSOURI ZIP Code + 4 64131	7 a Nature of Interest Transaction or Income Meal Provided during discussion of Lejet while attending TRI - FUND CONFERENCE 7 b Amount 33 87

Signature

15 Signature and verification The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true correct, and complete (See the section on penalties in the instructions)

Signed **Don L Fontanini**

On **8/12/05**
Date

816/444-0062
Telephone Number